Exceptional Family Members Program Conference

November 17, 2009

TRICARE Panel

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TRICARE Management Activity

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TRICARE Management Activity

TRICARE Basics

Complete, Unified & Integrated Health System

Military Treatment Facilities (MTF)

- "Direct Care System"
- Run by the services' Surgeons General
- Includes hospitals, clinics and pharmacy

Civilian Health Care Facilities

- "Purchased Care System"
- Networks of civilian providers administered by the Managed Care Support Contractors (MCSC)
- Overseen by TRICARE Management Activity

A Week in the Life of TRICARE

- **21,800 inpatient admissions**
  - 5,000 direct care
  - 16,800 purchased care
- **1.6 million outpatient visits**
  - 737,000 direct care
  - 876,400 purchased care
- **103,000 dental visits**
  - Direct care only
- **3.5 million claims processed**
- **2.48 million prescriptions**
  - 914,000 direct care
  - 1.37 million retail pharmacies
  - 200,000 mail order
- **2,380 births**
  - 1,010 direct care

care

Developing a TRICARE Benefit

- **3 Requirements:**
  - Cannot be excluded by law (statute) or regulation (Code of Federal Regulation)
  - Must be medically necessary and appropriate (proven, safe, effective) and represent the standard for good health care in the United States
  - Must be funded and administratively added to the TRICARE Program

- **Determine a need**
  - Federal law, national healthcare coverage & reimbursement, advanced in medical science, scientific reviews
- **Review statute and regulation**
- **Obligated by law to consider**:
  - Well-controlled research studies published in respected medical literature
  - Published formal technology assessments
  - Published reports of national professional medical associations
  - Published positions of national medical policy organizations
- **Find the resources to cover the benefit** – funding must compete with existing and planned TRICARE programs
- **Change TRICARE manuals**
- **Incorporate changes into contracts** for implementation

TRICARE Program Slides

TRICARE Programs and Plans

- TRICARE Standard - *fee-for-service plan*
  - TRICARE Reserve Select
- TRICARE Extra - *preferred provider option*
- TRICARE Prime - *managed care option*
- TRICARE Prime Remote - *Prime option in remote locations*
- TRICARE Global Remote Overseas – Prime in remote overseas locations
- TRICARE for Life (TFL) - *Medicare-TRICARE beneficiaries*
- Transitional Benefits
  - *TAMP*
  - *TRICARE Reserve Select*

TRICARE Standard

- Basic entitlement - Fee-for-service option
- Freedom to choose any TRICARE-authorized provider (Network or Non-network)
- Referrals not required, but some care may require prior authorization
- Available worldwide
- Enrollment NOT required
- Claims submitted by provider or beneficiary
- Higher out-of-pocket costs

TRICARE Extra

- Fee-for-service option, similar to a Preferred Provider Organization
- Choose any TRICARE network provider
- Referrals not required, but some care may require prior authorization
- Not available worldwide
- Space-available access for care at military treatment facilities
- Enrollment NOT required
- Claims submitted by provider
- Fewer out-of-pocket costs than Standard

TRICARE Prime/TOP Prime

- Live in Prime Service Area (< 30 minute drive time)
- Receives most care from Primary Care Manager (PCM)
- PCM refers for specialty care; Authorization required
- Priority access for care at military treatment facilities
- Enrollment required
- No claims to file
- Fewer out-of-pocket costs than other TRICARE options
- TRICARE Overseas Program-Prime: Family member must be command-sponsored

TRICARE Prime Remote

- Eligible for those in remote locations
  - More than 50 miles or an hour drive time from a MTF
  - Pre-determined zip codes
- Receives most care from Primary Care Manager (PCM)
- PCM refers for specialty care – Authorization required
- ADSMs must enroll
- ADFMs have option to enroll or use TRICARE Standard and Extra
- No claims to file
- Fewer out-of-pocket costs

TRICARE Global Remote Overseas (TGRO)

- For those in remote locations overseas; local networks of licensed, qualified physicians in remote overseas locations developed
- Family Member must be Command-Sponsored
- Receives most care from Primary Care Manager (PCM)
- PCM or TGRO Call Center refers for specialty care
- Enrollment required, no enrollment fees
- No claims to file
- Fewer out-of-pocket costs than TRICARE Standard Overseas

Transitional Benefits

- Transitional Assistance Management Program (TAMP)
  - Qualify: Reflected in DEERS
  - 180 days of extended coverage
  - If want to continue Prime: Re-enrollment required
    - TPR not available during TAMP
  - Sponsor is equal to Active Duty Family Member status
  - Can maintain ECHO eligibility
- TRICARE Reserve Select
  - Member of Selected Reserve
  - Enrollment Required; premium-based
  - Standard benefit

TRICARE For Life

- Medicare wraparound Program for Medicare-TRICARE dual eligible beneficiaries
  - TRICARE is second payer to Medicare for Medicare-TRICARE covered services
- Requirements for Part B
  - Not required for Active Duty/Active Duty Family Members
  - Required for all others (AD/ADFMs need to purchase prior to sponsor's retirement)
- Medicare-TRICARE beneficiaries
  - Under 65 – May Enroll in TRICARE Prime/
    - Prime Remote if Active Duty/Family Member
  - 65 and Older - TRICARE For Life
- OHI becomes second payer; TRICARE third
- TRICARE Plus – Space Available Basis

Appeals

What can be appealed

- A decision denying TRICARE payment
- A decision denying a request for prior authorization (e.g. not medically necessary, not a covered benefit, inappropriate level of care)
- Recoupment actions - errors in cost shares erroneously
- A decision to stop TRICARE payment for continuing previously authorized services/supplies
- A decision denying a provider's request to become TRICARE authorized or expelling a provider from the TRICARE network

What can't be appealed

- The amount TRICARE charges for a particular medical service
- Decisions relating to eligibility as a TRICARE beneficiary
- Denial of services provided by a provider that is not TRICARE authorized
- Refusal of a PCM to provider services or refer a beneficiary to a specialist
- Point of Service charges
- Establishment or weighting factors of a DRG

Appeal Process

- Reconsideration –conducted by the contractor
- Formal Review conducted by TMA or second reconsideration by the NQMC
- Hearing conducted by TMA

TRICARE

Getting Assistance

Responsibility of the MCSCs: The regional Managed Care Support Contractors (MCSCs) perform various functions in support of MTFs. Some responsibilities include:

- Establishing and maintaining the TRICARE Prime provider network
- Delivering customer service
- Operating TRICARE Service Centers
- Providing administrative support for enrollment, disenrollment, and claims processing
- Managing the referral function
- Performing medical reviews for referrals to the network

Getting Assistance

- **Beneficiary Counseling and Assistance Coordinator (BCAC)**
  - Serves as beneficiary advocate and problem-solver
  - Coordinates with appropriate points of contact best meet beneficiary needs for information or assistance.
  - Counsel beneficiaries and clarify information on their TRICARE benefit; consults with others as necessary.

- **Debt Collection Assistance Officer (DCAO)**
  - To receive services from a DCAO, beneficiaries must present either
    - A letter from a collection agency indicating initiation of active collection action; and/or
    - A credit report that reflects a negative credit status due to a TRICARE payment Issue
  - Assist beneficiary in determining basis for debt collection

- BCAC/DCAO Directory: http://www.tricare.mil/bcacdcao/

Serving Those with Special Needs

Such as…

- Potentially life-threatening condition
- Current and/or chronic mental health condition
- A diagnosis of one of the following:
  - asthma or other respiratory-related diagnosis
  - attention deficit disorder/attention deficit hyperactivity disorder

Serving Those with Special Needs

- TRICARE's basic benefit covers those with special needs
  - Physical Therapy, Occupational Therapy, Speech Therapy
  - Durable Medical Equipment
    - Wheel chair and lift
  - Behavioral Health Services
  - Clinical Cancer Trials
  - Hospice
  - Etc…

Special Needs Page

- http://www.tricare.mil/mybenefit/home/LifeEvents/Speci
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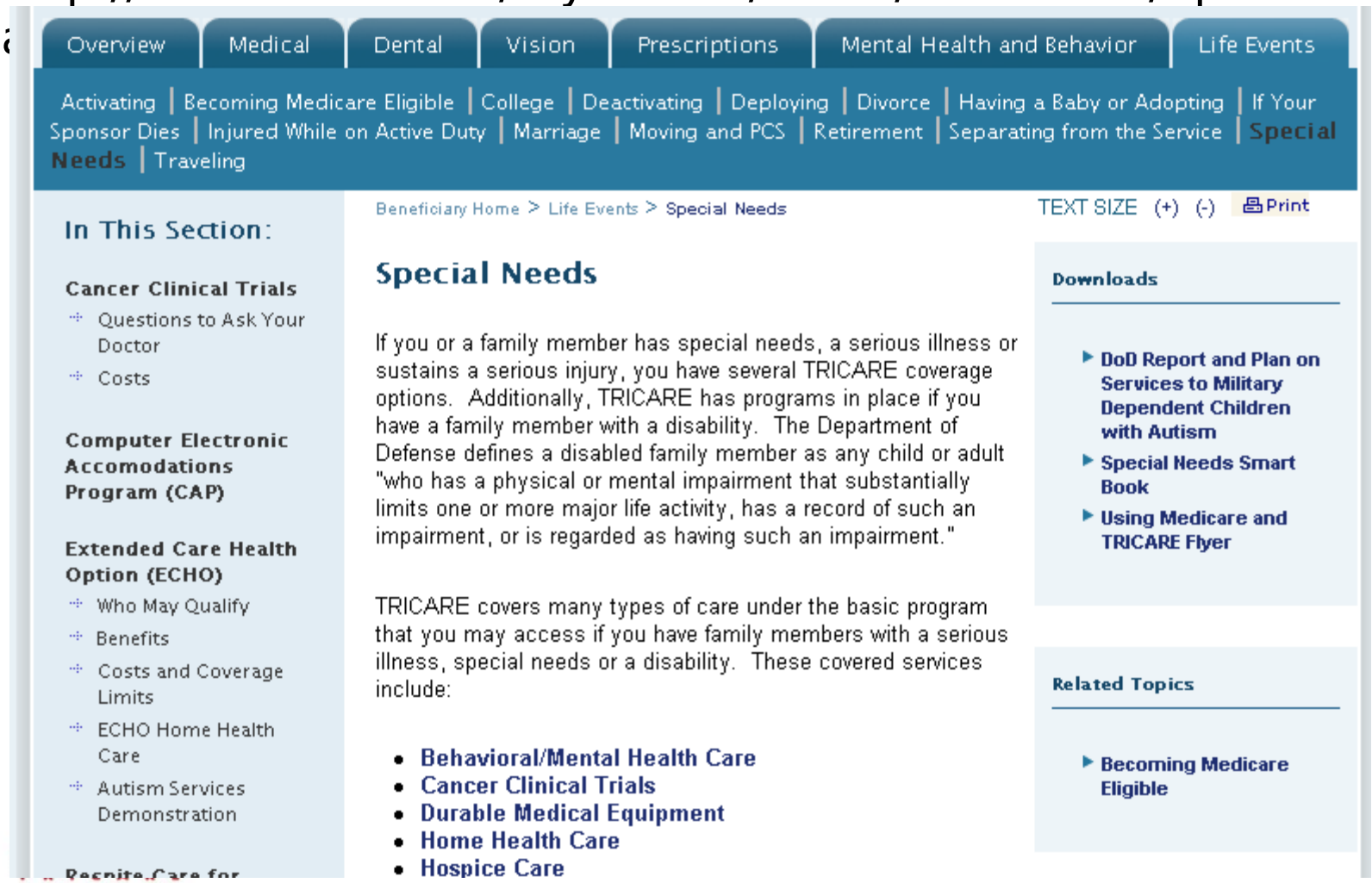
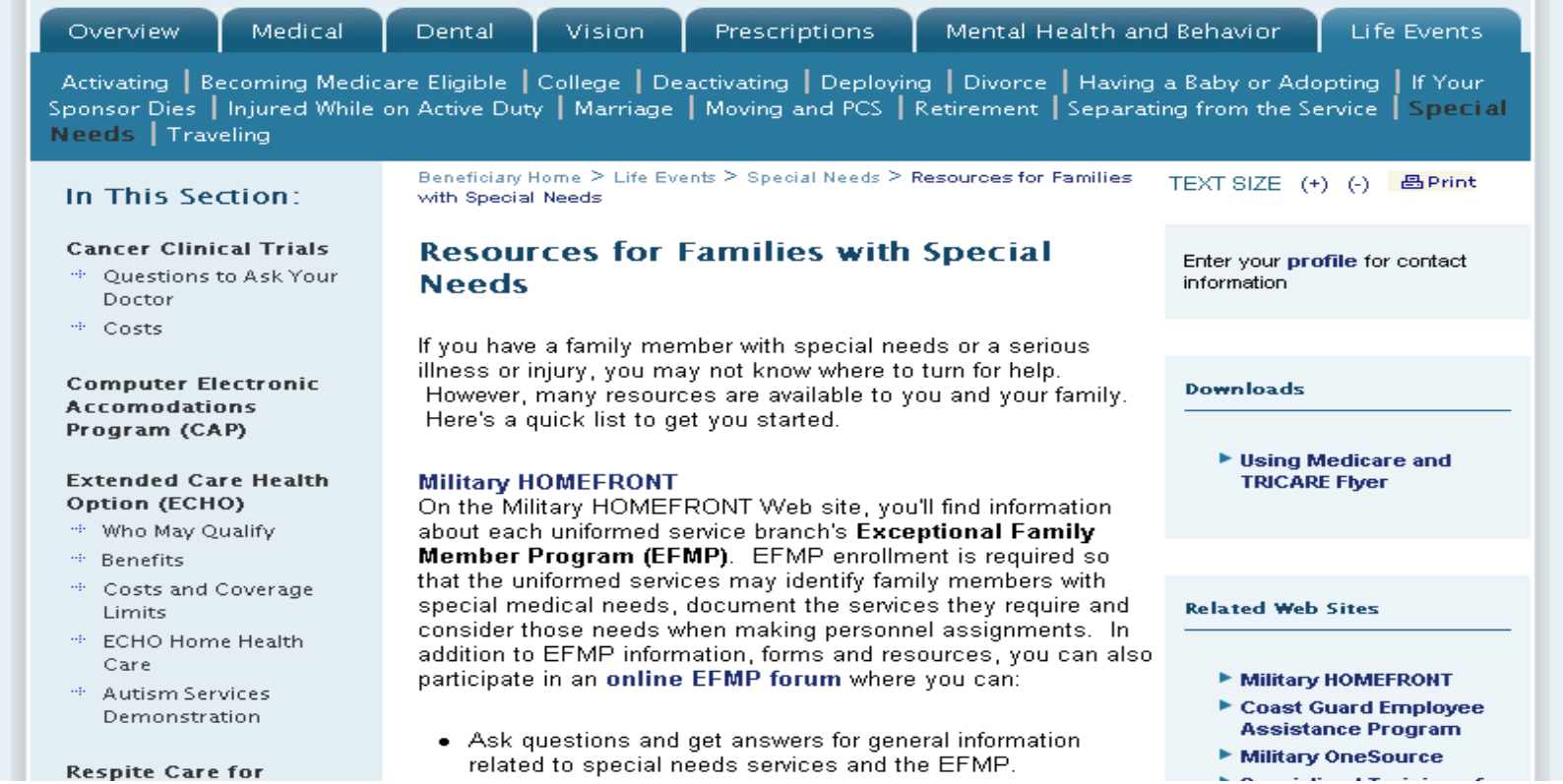

Overview
Medical
Dental
Vision
Prescriptions
Mental Health and Behavior
Life Events
Activating | Becoming Medicare Eligible | College | Deactivating | Deploying | Divorce | Having a Baby or Adopting | If Your Sponsor Dies | Injured While on Active Duty | Marriage | Moving and PCS | Retirement | Separating from the Service | Special Needs | Traveling
In This Section:
Cancer Clinical Trials
Questions to Ask Your Doctor
Costs
Computer Electronic Accomodations Program (CAP)
Extended Care Health Option (ECHO)
Who May Qualify
Benefits
Costs and Coverage Limits
ECHO Home Health Care
Autism Services Demonstration
Beneficiary Home > Life Events > Special Needs
TEXT SIZE (+) (-) Print
Special Needs
If you or a family member has special needs, a serious illness or sustains a serious injury, you have several TRICARE coverage options. Additionally, TRICARE has programs in place if you have a family member with a disability. The Department of Defense defines a disabled family member as any child or adult "who has a physical or mental impairment that substantially limits one or more major life activity, has a record of such an impairment, or is regarded as having such an impairment."
TRICARE covers many types of care under the basic program that you may access if you have family members with a serious illness, special needs or a disability. These covered services include:
Behavioral/Mental Health Care
Cancer Clinical Trials
Durable Medical Equipment
Home Health Care
Hospice Care
Downloads
DoD Report and Plan on Services to Military Dependent Children with Autism
Special Needs Smart Book
Using Medicare and TRICARE Flyer
Related Topics
Becoming Medicare Eligible

Special Needs Resources Web Page

- http://www.tricare.mil/mybenefit/home/LifeEvents/SpecialNeeds/Resources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Respite Care for
Beneficiary Home > Life Events > Special Needs > Resources for Families with Special Needs
TEXT SIZE (+) (-) Print
Resources for Families with Special Needs
If you have a family member with special needs or a serious illness or injury, you may not know where to turn for help. However, many resources are available to you and your family. Here's a quick list to get you started.
Military HOMEFRONT
On the Military HOMEFRONT Web site, you'll find information about each uniformed service branch's Exceptional Family Member Program (EFMP). EFMP enrollment is required so that the uniformed services may identify family members with special medical needs, document the services they require and consider those needs when making personnel assignments. In addition to EFMP information, forms and resources, you can also participate in an online EFMP forum where you can:
Ask questions and get answers for general information related to special needs services and the EFMP.
Enter your profile for contact information
Downloads
Using Medicare and TRICARE Flyer
Related Web Sites
Military HOMEFRONT
Coast Guard Employee Assistance Program
Military OneSource

Extended Care Health Option (ECHO)

What is ECHO?

- "Supplement" to the TRICARE Basic Program
  - How?
    - Provides authorized benefits not otherwise available
    - Provides additional financial resource for integrated services
  - Purpose?
    - To reduce the "disabling" effects of the qualifying condition

Extended Care Health Option (cont'd)

- Available to:
  - Active duty family members
  - Guard/Reserve Family Members – sponsor on AD >30 days
  - Family members during a TAMP period

- Provides financial assistance to active duty family members with **qualifying conditions**:
  - Moderate or severe or mental retardation
    - Infant / Toddler ~ Early Intervention Service
  - Serious physical disability
  - Extraordinary physical/psychological condition – "homebound"
  - Multiple disabilities

- Families must enroll in the Service's Exceptional Family Members Program (EFMP) based on Service guidance

ECHO Cost Sharing

- Cost Share is a sliding scale based on sponsor's pay grade
  - Applies only to months ECHO benefits received
  - Does not accrue to the catastrophic cap
- Government cost share is limited to $2500/month or $36,000/year for **certain** benefits available through ECHO, per eligible family member.
- ECHO benefit authorization must be obtained prior to receiving **ALL** ECHO services
- Must use TRICARE-authorized providers

ECHO Benefits

- Assistive Services (interpreter or translator)
- Durable equipment (computer assistive device)
- Medical and rehabilitation services/supplies
- Training to use assistive technology
- Institutional care
- Special education (IDEA)
  - Applied Behavior Analysis (ABA)
  - Autism Demonstration Project
- Transportation under certain limited circumstances, including medical attendant for safe transport

More ECHO Benefits

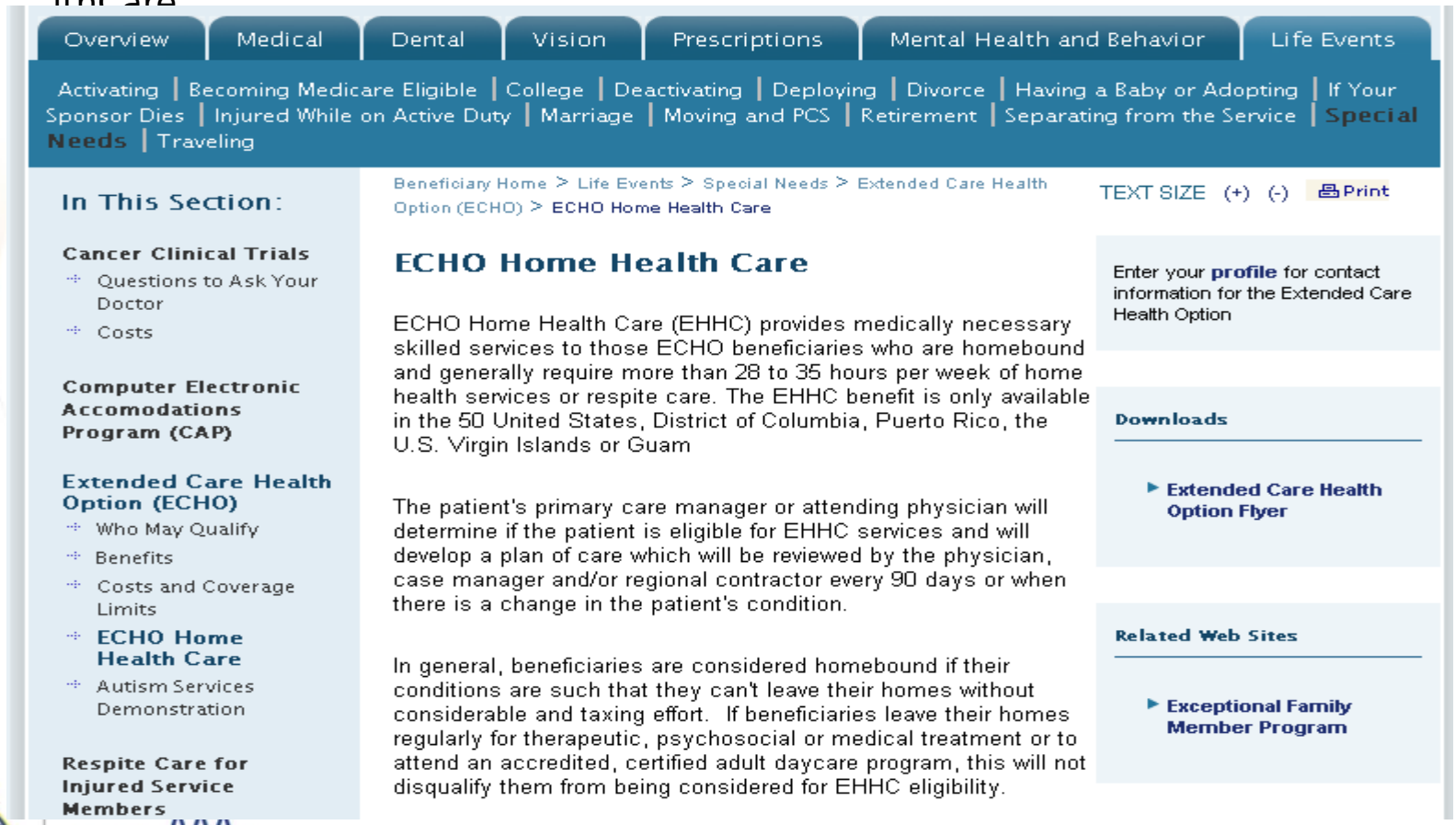
- ECHO Home Health Care (EHHC)
  - Medically Necessary Skilled Care in the Home
    - RN/LVN/Home Health Aide/OT/PT/ST
    - Not limited to part time or intermittent
  - Capped by fiscal year cost, not by hours
  - Must be a Medicare/Medicaid certified agency

- EHHC Respite Care—"Sleep benefit"
  - 8 hrs/day, 5 days per week
  - Eligible beneficiary requires frequent interventions (requires training by medical personnel-but doesn't have to be "skilled" interventions

- ECHO Respite Care—"Date" break
  - 16 hrs/month break for primary caregivers
  - Can ONLY be used in a month when another ECHO benefit is being received
  - Cannot be used at the same time as the EHHC respite benefit

ECHO Web Page

- http://www.tricare.mil/mybenefit/home/LifeEvents/SpecialNeeds/ECHO/HomeHealthCare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Beneficiary Home > Life Events > Special Needs > Extended Care Health Option (ECHO) > ECHO Home Health Care
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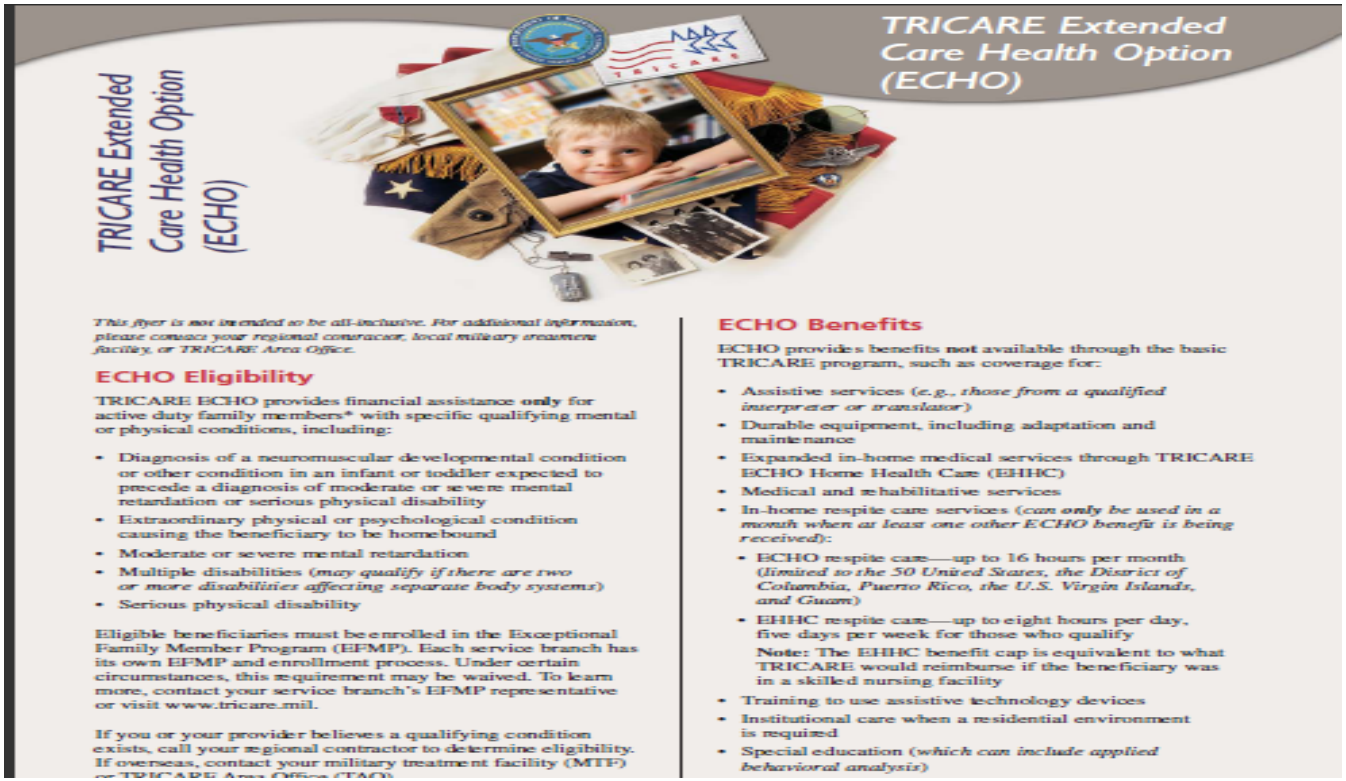
ECHO Home Health Care
ECHO Home Health Care (EHHC) provides medically necessary skilled services to those ECHO beneficiaries who are homebound and generally require more than 28 to 35 hours per week of home health services or respite care. The EHHC benefit is only available in the 50 United States, District of Columbia, Puerto Rico, the U.S. Virgin Islands or Guam
The patient's primary care manager or attending physician will determine if the patient is eligible for EHHC services and will develop a plan of care which will be reviewed by the physician, case manager and/or regional contractor every 90 days or when there is a change in the patient's condition.
In general, beneficiaries are considered homebound if their conditions are such that they can't leave their homes without considerable and taxing effort. If beneficiaries leave their homes regularly for therapeutic, psychosocial or medical treatment or to attend an accredited, certified adult daycare program, this will not disqualify them from being considered for EHHC eligibility.
Enter your profile for contact information for the Extended Care Health Option
Downloads
Extended Care Health Option Flyer
Related Web Sites
Exceptional Family Member Program

ECHO Flyer

- http://www.tricare.mil/tricaresmart/default.aspx
- http://www.tricare.mil/tricaresmart/product.aspx?id=732



TRICARE Extended Care Health Option (ECHO)

TRICARE Extended Care Health Option (ECHO)

This flyer is not intended to be all-inclusive. For additional information, please contact your regional contractor, local military treatment facility, or TRICARE Area Office.

ECHO Eligibility

TRICARE ECHO provides financial assistance **only** for active duty family members* with specific qualifying mental or physical conditions, including:

- Diagnosis of a neuromuscular developmental condition or other condition in an infant or toddler expected to precede a diagnosis of moderate or severe mental retardation or serious physical disability
- Extraordinary physical or psychological condition causing the beneficiary to be homebound
- Moderate or severe mental retardation
- Multiple disabilities (*may qualify if there are two or more disabilities affecting separate body systems*)
- Serious physical disability

Eligible beneficiaries must be enrolled in the Exceptional Family Member Program (EFMP). Each service branch has its own EFMP and enrollment process. Under certain circumstances, this requirement may be waived. To learn more, contact your service branch's EFMP representative or visit www.tricare.mil.

If you or your provider believes a qualifying condition exists, call your regional contractor to determine eligibility. If overseas, contact your military treatment facility (MTF) or TRICARE Area Office (TAO).

ECHO Benefits

ECHO provides benefits **not** available through the basic TRICARE program, such as coverage for:

- Assistive services (*e.g., those from a qualified interpreter or translator*)
- Durable equipment, including adaptation and maintenance
- Expanded in-home medical services through TRICARE ECHO Home Health Care (EHHC)
- Medical and rehabilitative services
- In-home respite care services (*can only be used in a month when at least one other ECHO benefit is being received*):
  - ECHO respite care—up to 16 hours per month (*limited to the 50 United States, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and Guam*)
  - EHHC respite care—up to eight hours per day, five days per week for those who qualify

  Note: The EHHC benefit cap is equivalent to what TRICARE would reimburse if the beneficiary was in a skilled nursing facility
- Training to use assistive technology devices
- Institutional care when a residential environment is required
- Special education (*which can include applied behavioral analysis*)

Key Players in Special Needs Coordination

- Family
- Primary Care Manager or Provider
  - Primary Contact for care
- Managed Care Support Contractor (MCSC) Case Manager
  - Medical Management
  - Care Coordination & Collaboration
- ECHO Case Manager
  - Collaboration & Communication
  - Extension of Medical Management

Key Players in Special Needs Coordination (Cont.)

- TRICARE Regional Office Nurse Consultant
  - Liaison between MTF, beneficiary, MCSC and TMA
  - Oversees contractual requirements of the MCSC
- TMA Special Needs Consultant
  - Liaison between beneficiary, TROs & MCSCs
- TRICARE–Overseas
  - TRICARE Area Office facilitates ECHO registration and assists with program information
  - MTF Case Manager facilitates care coordination

TRICARE Regional Offices

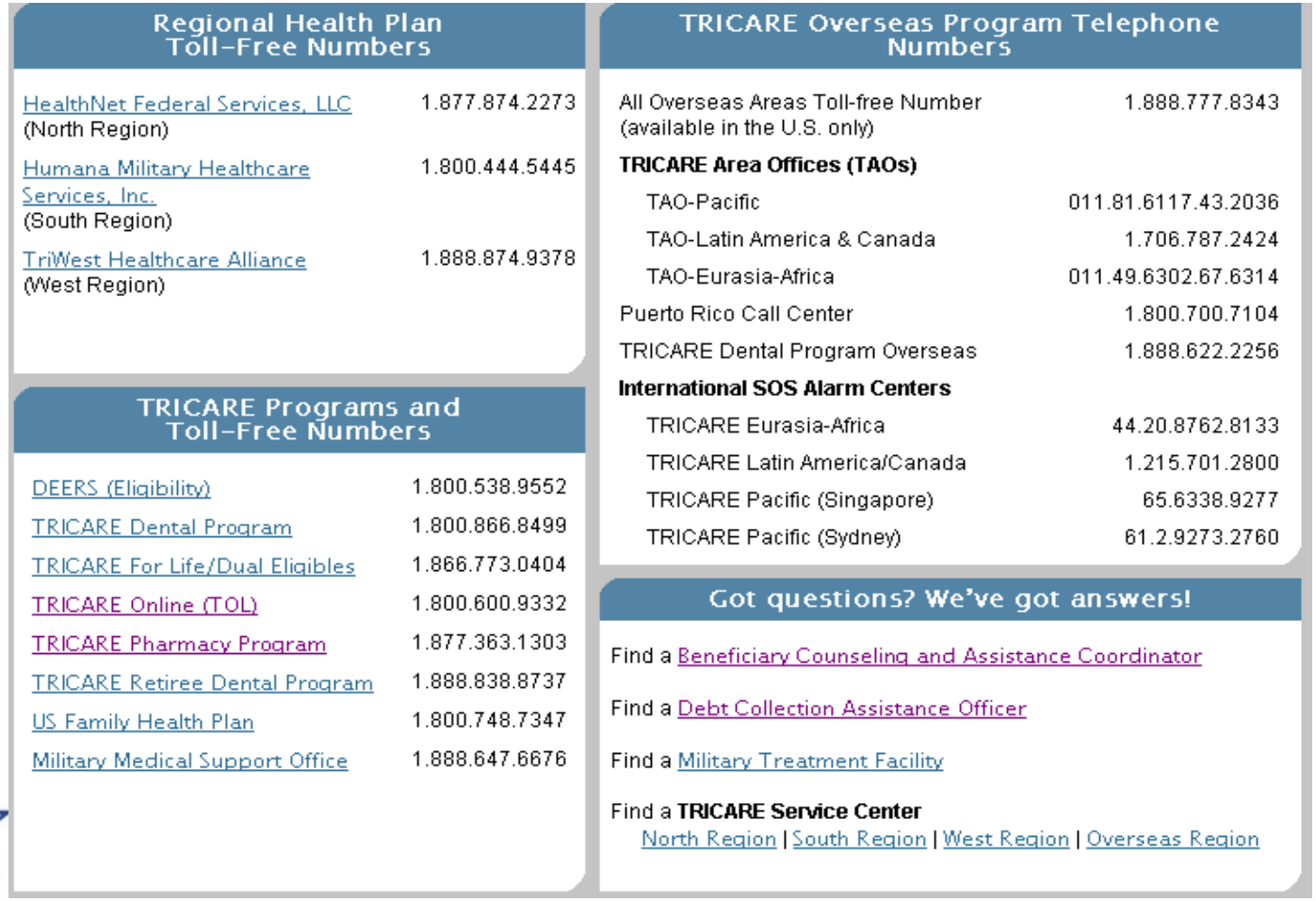
- **TRICARE Regional Office—South**
  (210) 292–3207
  www.tricare.mil/trosouth
  Nurse Consultant: Ms. DeLeon-Dingman

- **TRICARE Regional Office—North**
  (703) 588–1834
  www.tricare.mil/tronorth
  Nurse Consultant: Ms. Johnson

- **TRICARE Regional Office—West**
  (619) 236–5356
  www.tricare.mil/trowest
  Nurse Consultant: Ms. Wertz

Resources

- Contact information for regional/overseas program offices, find an MTF and TSC http://www.tricare.mil/contactus/



Regional Health Plan Toll-Free Numbers

HealthNet Federal Services, LLC (North Region)	1.877.874.2273
Humana Military Healthcare Services, Inc. (South Region)	1.800.444.5445
TriWest Healthcare Alliance (West Region)	1.888.874.9378

TRICARE Programs and Toll-Free Numbers

DEERS (Eligibility)	1.800.538.9552
TRICARE Dental Program	1.800.866.8499
TRICARE For Life/Dual Eligibles	1.866.773.0404
TRICARE Online (TOL)	1.800.600.9332
TRICARE Pharmacy Program	1.877.363.1303
TRICARE Retiree Dental Program	1.888.838.8737
US Family Health Plan	1.800.748.7347
Military Medical Support Office	1.888.647.6676

TRICARE Overseas Program Telephone Numbers

All Overseas Areas Toll-free Number (available in the U.S. only)	1.888.777.8343
TRICARE Area Offices (TAOs)	
TAO-Pacific	011.81.6117.43.2036
TAO-Latin America & Canada	1.706.787.2424
TAO-Eurasia-Africa	011.49.6302.67.6314
Puerto Rico Call Center	1.800.700.7104
TRICARE Dental Program Overseas	1.888.622.2256
International SOS Alarm Centers	
TRICARE Eurasia-Africa	44.20.8762.8133
TRICARE Latin America/Canada	1.215.701.2800
TRICARE Pacific (Singapore)	65.6338.9277
TRICARE Pacific (Sydney)	61.2.9273.2760

Got questions? We've got answers!

Find a Beneficiary Counseling and Assistance Coordinator

Find a Debt Collection Assistance Officer

Find a Military Treatment Facility

Find a **TRICARE Service Center**
North Region | South Region | West Region | Overseas Region

Closing

- Thank you for your attention and your assistance to exceptional families

- Questions????